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ABSTRACT

Public Law 94-142, the Education for All Handicapped Children Act of 1975, stipulates that an Individualized Educational Program (IEP) be prepared for each handicapped child going to public school. Each IEP must include a statement of the child's current performance, a statement of annual goals and instructional objectives, a statement of services to be provided to the child, the dates when services are to be initiated and their expected duration, and appropriate evaluation criteria and procedures. A study of the IEP process in a large urban school system in Texas found that a significant amount of legally required information was missing from the IEPs; that speech handicapped students' IEPs were more accurately written than those of either mentally retarded or learning disabled students; that the majority of IEPs were not appropriately reviewed and updated; that parent involvement was moderate and related to the accuracy of the IEPs; and that parents who had been informed about the nature of their child's IEP thought it a good plan. The study sampled 1317 IEP documents for students with eight handicapping conditions and surveyed 236 parents. This report discusses the methodology used in the study and the reliability of that methodology. (Author/PGD)

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# A Study of the IEP: Parent and School Perspectives

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Abstract

A study was conducted of the Individualized Educational Program (IEP) to provide a context evaluation for a large urban school district and to study the IEP process thoroughly. IEP documents (n=1317), sampled representatively across eight handicapping conditions, were audited and parents (n=236), of students whose IEPs has been audited, surveyed by telephone. The data results indicated the level of completeness and accuracy of IEP information, the level of parental involvement in the IEP process, and the areas where IEP process improvements are warranted. A profile of the most complete and accurate IEP was generated.

# A STUDY OF THE IEP: PARENT AND SCHOOL PERSPECTIVES

## Introduction

Public Law 94-142, The Education for All Handicapped Children Act of 1975, is the culmination of a trend begun in the early 1970's when a consent decree was entered into in the Pennsylvania Association for Retarded Children vs. Commonwealth of Pennsylvania (1972). The consent decree provided that the state could not postpone, terminate, or deny free access to publicly supported education to mentally retarded children. The case of Mills vs. Board of Education of the District of Columbia (1972) extended the principle of free access to public education to all handicapped children. The basis for these early decisions was the Equal Protection Clause of the Fourteenth Amendment which guarantees equal protection under the law to all people. The plaintiffs argued that when a state provides free public education, it is required to provide free public education for all school aged children regardless of handicap. These two cases established the precedent for handicapped children's right to free public education. Consequently, states began to adopt legislation requiring free public education for all handicapped children.

As more states enacted legislation, the federal government also began to enact laws which more uniformly extended the principle to all handicapped children. Congress felt the forerunner, PL 93-380, Education of the Handicapped Amendments of 1974, was too narrow in focus; therefore, they passed PL 94-142 to compliment and broaden the scope of PL 93-330. PL 94-142 stated more strongly than PL 93-380 that children would receive a free appropriate public education in the "least restrictive environment." The "least restrictive environment" is the regular classroom, unless

another setting is prescribed as more appropriate in meeting the handicapped child's special needs.

In addition to broader definitions of student and parental rights, this law set forth a specific process by which to implement the law. The structuring of the Individualized Educational Program (IEP) for each handicapped student is the key process for effectively complying with the law. The process also stipulated that the IEP be developed in a meeting that includes the parents or guardian of the handicapped child.

> In truth, much of the success (or failure) of PL 94-142 in achieving its main goal of providing quality education for all handicapped children lies in the effectiveness of the IEP-how it is perceived, conceived, and carried out. (Kaye and Aserlind, 1979, p. 138)

The purpose of the IEP is to serve as a management device which defines specific services appropriate for each handicapped child in need of special education services. The following is a list of PL 94-142 requirements for each student's IEP:

- a statement of the child's present levels of educational performance;
- a statement of annual goals, including short term instructional objectives;
- a statement of the specific special education and related services to be provided to the child, and the extent to which the child will be able to participate in regular education programs;
- the projected dates for initiation of services and the anticipated duration of the services; and
- appropriate objective criteria and evaluation procedures and schedules for determining, on at least an annual basis, whether the short term instructional objectives are being achieved.

## Previous Studies

Several studies have been conducted that examined various aspects of the IEP. A study by the Pennsylvania Department of Education (Wall, 1978)

examined 1633 IEPs developed for handicapped children in preschool programs. The study indicated that children receiving more services tended to have more accurate IEPs. In addition, the goals and objectives were more comprehensively written for the child receiving the greater number of services.

Anderson, Barner, and Larson (1978) examined more than 400 randomly selected IEPs from the Santa Barbara School District. They found most of the instructional objectives in the IEPs were limited to reading, math or language. The investigators concluded that educators need to improve the specification of goals and objectives.

Alper (1978) conducted a study of 265 IEPs from 13 California school districts. The investigator sought to determine if there were major differences in the IEPs written by various committees. The most frequently found errors were poorly structured long term goals and short term objectives and various types of missing information, such as, student's grade level, percent of time in regular classroom, justification for the placement decision, and parental consent signatures.

Reisman and Macy (1978) conducted a study of 102 randomly selected IEPs from Dallas Independent School District. The IEPs were rated according to legally required components and student demographic data. The study indicated that annual goals and short term objectives were limited to math and language arts. However, they found that IEPs developed by speech pathologists were superior to the IEPs written by other educational professionals.

A study conducted by the National Committee for Citizens in Education (NCCE, 1979) evaluated the IEP from the perspective of 2400 parents residing in 46 states. NCCE reported that 83% of these parents attended IEP meetings; 70% stated that the IEP contained important information about their child's educational goals, objectives, services and present performance levels; and over two-thirds of the parents indicated that they were adequately informed about the program and that the program met their child's needs. However, 52% of these parents stated that the IEP was completed before the meeting, and 30% said the IEP did not indicate how much time their child would spend in the regular classroom.

In summary, the review of the literature indicated comparable findings in several areas. For example, Anderson, Barner, and Larson (1978), Alper (1978), and Reisman and Macy (1978) found a significant amount of missing legally required information on the IEP. In addition, each study concluded that there was a need to improve the quality of long term goals and short term objectives. All found the most frequently written objectives were in reading, math, or language. Other findings related to this present study were that speech pathologists write more complete and accurate IEPs (Reisman and Macy, 1978) and that students receiving more services had better objectives and more complete IEPs (Wall, 1978). Overall, parents reacted favorably to the IEP process (NCCE, 1979).

## Purpose of the Study

This study addressed many of the same variables included in previous

studies but also examined three aspects of the IEP not previously considered. Two major purposes of this study were identified. First, this study was a context evaluation of the IEPs within a large urban school system. Stufflebeam, et al. (1971, p. 218) state:

> It (context evaluation) defines the relevant environment, describes desired and actual conditions pertaining to that environment, identifies unmet needs and unused opportunities, and diagnoses the problems that prevent needs from being met and opportunities from being used.

This context evaluation was conducted by examining IEPs of students representing each handicapping condition to determine whether components of the IEP were completed as required by local, state, and federal guidelines. The second purpose of this study was to examine aspects of the IEP process that were not studied extensively in previous research. Specifically, this study examined IEPs of students by handicapping condition to ascertain differences among IEPs. Required reviews and updates of IEPs were also addressed to determine whether follow-up occurred within the IEP process. In addition, and perhaps more importantly, parent attitudes toward the IEP process were examined to gain insight into parental involvement which is necessary for proper implementation of PL 94-142. Using these three new areas, handicapping condition, review of IEPs, and parental involvement and opinions toward the IEP, it was anticipated that more insightful information regarding the IEP process would be obtained.

## Methodology

### Sample

The sampling was conducted in three distinct phases. In the initial

phase a stratified random sample was selected from the population of handicapped students receiving special education services in an urban school district. The sample was proportionately stratified by handicapping condition with subsequent random selection of the students' IEPs within each strata. The total sample of 2038 students represented 17% of the population of handicapped students in the district. Of the sample, 1317 IEPs were located for audit (see Table 1).

In order to evaluate the sixty-day, required IEP updates, a second sampling was necessary. A random sample of 90 campuses was selected which provided a total of 659 students' IEPs. The 659 IEPs were a subset of the total number of audited IEPs. In the final phase of sampling, a stratified random subsample of 556 students' IEPs was selected for survey of parents of students receiving special education services. One strata was defined as those parents who were present at the ARD (Admission, Review and Dismissal)/IEP meeting and the second strata was those parents who did not attend the ARD/IEP meeting. There were 263 and 293 parents respectively in the two stratas.

Instrumentation

The IEP data collection form was designed so that the presence or absence of accurate IEP data could be efficiently recorded. There were two revisions of the form, each following a simulated IEP audit by the three independent raters employed by the district research office and assigned to evaluate special education programs (see Appendix A, IEP audit instrument and sample IEP).

TABLE I
Population, Sample, and Audited Sample
by Handicapping Condition

| Handicapping Condition | School System Population as of 10/79 N | Sample n | Sample % of Population | Audited Sample n | Audited Sample % of Population | Audited Sample % of Initial Sample |
|---|---|---|---|---|---|---|
| Visually Handicapped | 83 | 65 | 78% | 41 | 49% | 63% |
| Hearing Impaired | 294 | 30 | 10% | 30 | 100% | 10% |
| Deaf/Blind | 9 | 9 | 100% | 9 | 100% | 100% |
| Orthopedically Handicapped | 191 | 37 | 19% | 25 | 13% | 68% |
| Other Health Impaired | 108 | 19 | 18% | 13 | 12% | 68% |
| Mentally Retarded | 1,628 | 305 | 19% | 219 | 13% | 72% |
| Emotionally Disturbed | 271 | 28 | 10% | 20 | 7% | 71% |
| Language/Learning Disabled | 7,111 | 1,173 | 16% | 710 | 10% | 61% |
| Speech Handicapped | 2,189 | 372 | 17% | 251 | 11% | 67% |
| TOTAL | 11,834 | 2,038 | 17% | 1,317 | 12% | 65% |

In the summer of 1979, a parent survey was designed based on a survey conducted by the National Committee for Citizens in Education. The survey contained 22 items concerning the ARD/IEP process. Both English and Spanish versions of the survey were mailed to a random sample of 15% of the parents of handicapped students. A total of 346 surveys were returned representing 14.7% of those sampled. Of those returned surveys, approximately one-third were removed because of an indication that the responses were not valid. From the analyses of this data and from phone calls from approximately 50 parents who received the survey, it was determined that the questions were too complex to be answered via a mail survey. The decision was made to collect as much information regarding the IEP directly from the IEP through the audit process and only to survey parents regarding their opinions of the ARD/IEP process. The first parent survey form thus served as a pilot for the parent interview form used in this study.

The parent survey schedules were designed and piloted with 37 parents (15 of whom attended the ARD/IEP meeting and 22 who did not attend the meeting). Criticism and questions from the parents in the survey concerning the interview and improvements in the interview schedules were minimal which indicated that the survey schedules were appropriate for this study (see Appendix B, parent survey schedules).

Data Collection

In the initial stage of the IEP audit, the three raters audited the IEPs that were available in each of the district's six administrative offices. Each area special education administrator was notified of the

audit during the planning phase. The IEPs were located, audited and returned to the area administrator who had responsibility for their storage. During the update phase of the audit each rater visited approximately 30 campuses to audit IEP updates on the school campus. When an IEP was not located in its area administrative office, it was audited on the school campus if that campus was a part of the update sample. The IEP audit forms were postcoded to reflect where the IEP had been located for audit.

The parent survey was conducted by the same three independent raters and two other trained telephone interviewers, one of whom was bilingual, during the early evening hours over a period of five evenings following the initial IEP audit and the audit of updated IEPs. A total of 236 of 556 telephone interviews were completed for a response rate of 42%.

Reliability measures for the three raters were established using an inter-rater reliability technique. Moreover, to assess the dependability of the raters over the entire data collection period, the inter-rater reliabilities were examined on two occasions during the audit process; the first occasion was at the onset of the audit and the second occasion occurred during the final week of data collection. Due to the nature of the data, presence or absence of IEP information on qualitatively distinct indicators, inter-rater reliability among the three independent raters was meaningful only when considered variable-by-variable. Since all variables were true dichotomies, inter-rater reliability was assessed using phi. Phi was undefined for those variables where there was total rater agreement on a single rating; as when two raters rated one IEP variable to be present in every case or to be absent in every case therefore producing no variance and hence creating an undefined product-moment

correlation index. Due to this absence of variance in ratings, reliability was not quantified for those variables. For the purpose of the audit, the cases where phi was undefined corresponded to perfectly identical ratings.

On the first occasion, raters were asked to rate the same set of 48 IEPs with regard to 49 variables (see Appendix C, variable description) as either 1 (information correct/present) or 0 (information incorrect/not present). Glass and Stanley (1970) state that the geometric mean is useful for describing the central location of rate-of-change scores, therefore the geometric mean of the $\emptyset/\emptyset_{max}$ ratios was employed. Of these 49 qualitatively distinct variables, only 3 supported a calculated geometric mean for $\emptyset/\emptyset_{max}$ of less than .80; 13 variables had a mean ratio that ranged from .80 to .99; 22 variables had a calculated geometric mean for $\emptyset/\emptyset_{max}$ of 1.00; and 11 variables had no ratio of $\emptyset/\emptyset_{max}$ because $\emptyset$ was undefined (owing to a perfect agreement among the raters). When the reliability measures were collected on occasion two, there were again 3 variables whose mean $\emptyset/\emptyset_{max}$ was less than .80; 5 variables had a mean ratio that ranged from .80 to .99; 23 variables had a mean ratio of 1.00; and 18 variables had no ratio because $\emptyset$ was undefined. An extremely large amount of confidence can be placed in the dependability of the raters throughout the audit for 45 of the 49 qualitatively distinct variables. Additionally, two of the three variables for which the raters were not as dependable across the two occasions were identical.

## Data Analysis

### Descriptive Statistics

Descriptive statistics were obtained for each of the IEP variables. Based on the summary statistics, compliance with district, state education agency and federal guidelines was addressed (see Table 2, 3, and 4).

The components of the IEP correctly completed most often (91%-99%) were the description of the physical abilities and disabilities of the student, the behaviors of the student that would affect programming, the vocational skills of the student, and the minutes of the IEP meeting. The number of hours of service in special and regular education settings was completed for 70% of the IEPs. With the exception of hours of service, components of the IEP regarding services to be delivered were not as complete as the baseline student data components. Forty-three percent of the IEPs exhibited congruence between the instructional and related services designated on the IEP and the corresponding goals and objectives for the services; duration of services was appropriately completed on 18% of the IEPs; and the justification for instructional and related services was indicated on 38% of the IEPs.

The components of the IEP that comprised the specific instructional strategies were varied in level of accuracy and completeness. Current educational functioning level was indicated for 69% of the deficit areas, goals and objectives were written for 75%-76% of the deficit areas, but only 11% of the objectives were behaviorally written. Although start dates were listed in 62% of the deficit areas, end dates were indicated for only 35% of the deficit areas. The 60-day review of the objectives of the IEPs was correctly completed for only 46% of the IEPs.

TABLE 2
Percent of Variables Present or not Present on the IEP
n = 1317

| Variable | Present/Correct | Not Present/Incorrect |
|---|---|---|
| Handicapping Condition Agreement | 91% | 9% |
| Physical Abilities | 94% | 6% |
| Behavior | 94% | 6% |
| Vocational Skills | 91% | 9% |
| Service Hours | 70% | 30% |
| Instructional/Related Service | 43% | 57% |
| Duration | 18% | 82% |
| Justification | 38% | 62% |
| Minutes | 99% | 1% |

TABLE 3
Percent of Deficit Area Variables
In 3,759 Deficit Areas

| Variable | Present/Correct | Not Present/Incorrect |
|---|---|---|
| Deficit Area | 77% | 23% |
| Level | 69% | 31% |
| Goal | 75% | 25% |
| Objective | 76% | 24% |
| Behavioral Objective | 11% | 89% |
| Start Date | 62% | 38% |
| End Date | 35% | 65% |
| Person Responsible | 58% | 42% |

TABLE 4
Deficit Areas
n = 2895

| | % of Deficit Areas Found on the IEP |
|---|---|
| Reading | 29% |
| Math | 27% |
| Spelling | 19% |
| Speech | 8% |
| Language | 5% |
| Other | 12% |

IEP Accuracy Score

An IEP 'accuracy score' was created to reflect the accuracy of the deficit area variables on each IEP. The deficit area variables included level, goal, objective, behavioral objective, start date, end date, personnel responsible, and update (see Appendix C, variable description). Specifically, each IEP accuracy score is the ratio of the number of variables coded as correct/present to the number of deficit area variables eligible for audit. The accuracy score was defined as:

$$\frac{\sum_{i=1}^{I} X_i}{I \quad K}$$

where: $X_i$ {0: if incorrect/not present; 1: if correct/present

$I$ = number of IEP deficit area variables eligible to be coded

$K$ = number of deficit areas listed on the particular IEP

Deficit Areas. For each IEP, a maximum of five deficit areas could have been coded for audit. It was hypothesized that the mean accuracy score of the IEPs differed according to the number of deficit areas listed on the IEP. Because of the disproportionately small number of students exhibiting four and five deficit areas, these two categories were combined. A one-way ANOVA was calculated and a significant difference was obtained.

TABLE 5
Number of Deficit Areas
ANOVA Summary Table

| Source | DF | SS | MS | F |
|---|---|---|---|---|
| Between groups | 3 | 1.8536 | .6179 | 12.461 |
| Within groups | 1330 | 65.9494 | .0496 | |
| Total | 1333 | 67.8000 | | |

The magnitude of association measure omega squared ($\omega^2$) was calculated; only 2.5% of the total variance was accounted for in the ANOVA ($\omega^2$=.025). Though the difference observed between groups was statistically significant, there was minimal association between the number of deficit areas and the dependent variable, IEP accuracy score.

When post hoc contrasts (Scheffé, 1959) were fit to the mean accuracy scores of students exhibiting one, two, three, and either four or five deficits, a significant ($p<.05$) cubic trend was detected. Though this trend exists, the conjecture that the more deficits prescribed on an IEP the more accurate that IEP can not be supported. These data imply a non-monotonic trend substantially decreasing when three deficits are recorded. Figure 1 presents this cubic trend.

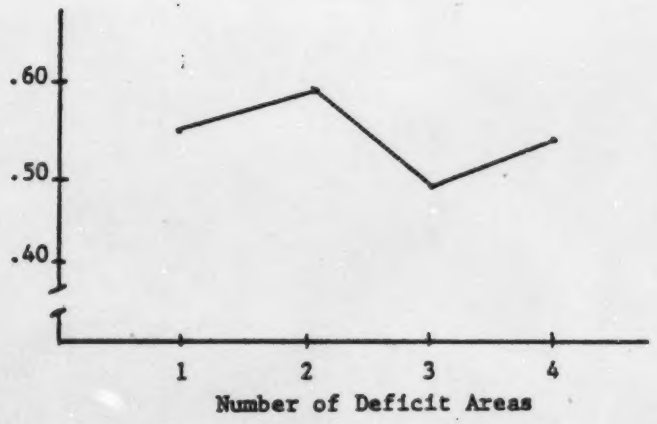


Figure 1. IEP accuracy scores for differing numbers of deficit areas

Handicapping Condition. It was hypothesized that speech handicapped, learning disabled, and mentally retarded students had different mean accuracy scores. A significant difference among the mean accuracy scores existed. The value of omega squared estimate from these data for the association between group membership (speech handicapped, learning disabled, and mentally retarded) and mean accuracy scores was .007; therefore there was minimal association between the independent and dependent variables.

TABLE 6
Speech Handicapped, Learning Disabled and Mentally Retarded
ANOVA Summary Table

| Source | DF | SS | MS | F |
|---|---|---|---|---|
| Between groups | 2 | .5371 | .2685 | 5.387 |
| Within groups | 1192 | 59.4217 | .0499 | |
| Total | 1194 | 59.9587 | | |

A post hoc contrast ordering the mean scores from highest to lowest (speech handicapped to learning disabled) was evidenced using a Scheffe test.

School Year. The IEP may be written during any school month for one year in duration. An a priori cubic trend among the mean accuracy scores was hypothesized according to the month in which the IEP was written reflecting the transition between semesters. Applying a Scheffé contrast to each of nine orthogonal polynomials fit to monthly mean accuracy scores (Winer, 1972), a significant ($p<.05$) cubic trend was detected indicating more accurate IEPs are written in the months of October, November, and December (see Figure 2).

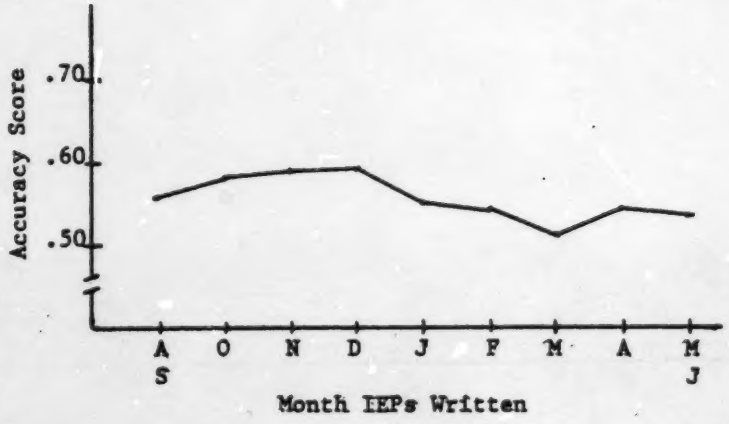


Figure 2. IEP accuracy scores by month IEP was written

Because the variances of accuracy scores across the nine months were homogeneous nothing can be said about posited differential rates of consistency among the accuracy scores throughout the school year. Hence there was somewhat uniform variability of accuracy scores across months.

Educational Level. IEPs were audited from both elementary schools and secondary schools. It was hypothesized that the mean accuracy scores of elementary school IEPs would be higher than the mean accuracy scores of secondary school IEPs. Elementary school IEPs had a significantly ($p<.05$) higher IEP accuracy score than the secondary school IEPs.

TABLE 7
Elementary and Secondary School
Student's t Analysis

| Group | $\bar{X}$ | Significance |
|---|---|---|
| Elementary IEPs (n=925) | .558 | $p<.05$ |
| Secondary IEPs (n=322) | .473 | |

Behavioral Objectives. Eleven percent of the objectives on the IEPs were behaviorally written; a one way ANOVA obtained a significant ($p<.05$) difference among the mean accuracy scores for those IEPs with behavioral objectives, those without behavioral objectives and those without objectives.

TABLE 8
Behavioral Objectives
ANOVA Summary Table

| Source | DF | SS | MS | F |
|---|---|---|---|---|
| Between groups | 2 | 28.7261 | 14.3630 | 491.8835 |
| Within groups | 1236 | 36.0430 | .0292 | |
| Total | 1238 | 64.7691 | | |

TABLE 9
Mean Accuracy Score
Behavioral Objectives

| Group | $\bar{X}$ |
|---|---|
| Behavioral objectives | .7415 |
| Not behavioral objectives | .5907 |
| No objective | .2405 |

The estimate of the magnitude of the association between the groups (as defined previously regarding behavioral objectives) and the IEP mean accuracy scores was .44. There is a moderate association which accounts for 44% of the total variance in the dependent variable.

Review and Update. Each deficit area listed on the IEP with goals and objectives is required by state and local guidelines to be reviewed and updated every sixty days. It was hypothesized that those deficit areas that were correctly updated would have a higher mean accuracy score than those deficit areas eligible for update but not correctly updated. This mean accuracy score was deficit area specific. The variable 'update' was not included in the calculation of this accuracy score because it was used to define group membership (i.e., correctly updated deficit area, incorrectly updated deficit area). One deficit area, eligible for update, was randomly selected from each IEP. A t-test was used to determine if a difference existed between the mean accuracy scores of the two groups. The correctly updated deficit areas had a significantly higher ($p<.05$) mean accuracy score.

TABLE 10
Updated Deficit Areas
Student's t Analysis

| Group | $\bar{X}$ | Significance |
|---|---|---|
| Correctly updated | .7438 | $p<.05$ |
| Incorrectly updated | .5642 | |

Survey of Parents

Participation in IEP Process. Parent involvement, as clearly indicated in PL 94-142, is vital to the ARD/IEP process. The IEP has two components that are used here to define parental involvement in the ARD/IEP process: presence of parent at the ARD/IEP meeting and parent signature on the IEP form. The mean IEP accuracy score from those IEPs where a parent was present at the ARD/IEP meeting was significantly ($p<.05$) higher than from IEPs where a parent was not present at the ARD/IEP meeting. The IEPs with parent signature affixed possessed a significantly ($p<.05$) higher mean accuracy score than those without parent signatures. These two components of parent involvement were not identical, in that 106 IEPs had parent signatures even though the parents did not attend the ARD/IEP meeting.

TABLE 11
Parent Involvement
Student's t Analysis

| Group | $\bar{X}$ | Significance |
|---|---|---|
| I. Parent present at ARD/IEP meeting (n=615) | .552 | $p<.05$ |
| Parent not present at ARD/IEP meeting (n=683) | .531 | |
| II. Parent signed the IEP (n=722) | .552 | $p<.05$ |
| Parent did not sign the IEP (n=580) | .525 | |

These data support the conclusion that a greater degree of accuracy and completeness of the IEP is associated with parental involvement in the ARD/IEP process. Fifty-six percent of the audited IEPs had evidence of parent signatures and for 47% of the IEPs there was indication that the parent attended the ARD/IEP meeting.

Opinion of IEP Process. Parents were surveyed to determine their opinions toward the ARD/IEP process. The frequency of responses to the questions asked during the telephone survey of the parents who attended the ARD/IEP meeting and those who did not attend the ARD/IEP meeting follows.

TABLE 12
Percent of Responses to Interview Questions
Parent Who Attended AFD/IEP Meeting
n = 109

| Question | Yes | No | Do not Remember | Undecided |
|---|---|---|---|---|
| 1. Did school personnel explain to you how the educational plan was going to be developed? | 72% | 13% | 15% | 0% |
| 2. Was the reason for writing the educational plan made clear to you at the meeting? | 72% | 9% | 19% | 0% |
| 3. Was information about how your child was doing in school explained clearly to you? | 88% | 9% | 3% | 0% |
| 4. Were the minutes of the meeting read before you signed the educational plan? | 81% | 5% | 14% | 0% |
| 5. Do you feel you had a chance to provide information about your child? | 95% | 1% | 4% | 0% |
| If yes: Was this information used in writing the educational plan? | 79% | 9% | 12% | 0% |
| 6. Do you think this was a good plan for what your child should learn in school? | 88% | 8% | 0% | 4% |

TABLE 13
Percent of Responses to Interview Questions
Parent Did Not Attend the ARD/IEP Meeting
n = 127

| Question | Yes | No | Do Not Remember | Undecided |
|---|---|---|---|---|
| Have you recieved a copy of your child's educational plan? | 49% | 44% | 7% | 0% |
| If yes: When you received the plan did you know what it was? | 76% | 22% | 2% | 0% |
| If yes: Did you think this was a good plan for what your child would learn in school? | 89% | 7% | 0% | 4% |

Summary and Conclusions

From these data, five major findings can be delineated. First, a significant amount of legally required information was missing from the IEPs. In particular, only 11% of the deficit areas contained behaviorally stated short term objectives. Reading, math, and language arts were cited most often as deficit areas on the IEP. The studies conducted by Anderson, et al. (1978), Alper (1978), and Reisman and Macy (1978) reached similar conclusions.

Second, speech handicapped students' IEPs were more accurately written than those of either mentally retarded or learning disabled students. These findings were supported in part by Reisman and Macy (1978) who found that speech pathologists developed more accurate IEPs than other

educational professionals. In the present study, the learning disabled students' IEPs generally contained three deficit areas while the speech handicapped students' IEPs contained an average of one deficit area.

Third, the majority of students' IEPs were not appropriately reviewed and updated within the required sixty-day period. Also, those IEPs that were correctly updated were found to be more accurate than those not correctly updated.

Fourth, parent involvement in the IEP process, defined by parent presence at the ARD/IEP meeting or parent signature on the IEP document, was moderate. IEPs of students whose parents either attended the ARD/IEP meeting or signed the IEP document were more accurate than those IEPs where the parents did not attend the meeting nor signed the IEP document.

Finally, of those parents surveyed who attended the ARD/IEP meeting, 88% indicated the IEP was "a good plan for what my child should learn in school." Of those parents who did not attend the ARD/IEP meeting, but who received a copy of the IEP and knew what it was, 89% indicated the IEP was a good plan. However, of the surveyed parents who did not attend the ARD/IEP meeting, one-half reported that they had not received a copy of the IEP.

From these data, a profile of the most accurate IEP can be drawn. Its characteristics follow:

-written for an elementary level student;
-parent present at ARD/IEP meeting and signed the IEP or parent not present, but signed the IEP;
-contained behaviorally stated objectives;
-does not have three deficit areas;
-had correctly updated objectives.

The IEP process was designed to insure that an effective instructional program, based on an individual student's needs, was planned. With information from this study of the status of the IEP and parental perceptions toward the IEP, decision makers will be able to determine if changes in the IEP process are indicated. The findings of this study indicate three major areas in which changes are needed: 1) goals and objectives that meet appropriate criteria; 2) correctly reviewed and updated IEPs, and 3) increased involvement of parents in the IEP process. Without an effective IEP process which includes development of an accurate IEP as well as parent involvement, the intent of PL 94-142 will not be fully met.

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# APPENDIX A

# DATA COLLECTION INSTRUMENT

Name_____ ID_____ DOB _____ SCHOOL_____ AUDITOR_____

ARD/IEP DATE _____ AREA_____ HANDICAPPING CONDITION:_____

| | | Up date | | | | | |
|---|---|---|---|---|---|---|---|
| Han. Cond. | _____ | Deficit | | | | | |
| Phy. Abil. | _____ | Level | | | | | |
| Behaviors | _____ | Goal | | | | | |
| Voc. Skills | _____ | Objectives | | | | | |
| Inst.Rel.Hr. | _____ | Beh. Obj. | | | | | |
| Correct | _____ | Start day | | | | | |
| Duration | _____ | End day | | | | | |
| Justif. | _____ | Personnel | | | | | |

Agreement _____ _____ _____ Signature_____ Present_____ Minutes_____

Name_____ ID_____ DOB _____ SCHOOL_____ AUDITOR_____

ARD/IEP DATE _____ AREA_____ HANDICAPPING CONDITION:_____

| | | Up date | | | | | |
|---|---|---|---|---|---|---|---|
| Han. Cond. | _____ | Deficit | | | | | |
| Phy. Abil. | _____ | Level | | | | | |
| Behaviors | _____ | Goal | | | | | |
| Voc. Skills | _____ | Objectives | | | | | |
| Inst.Rel.Hr. | _____ | Beh. Obj. | | | | | |
| Correct | _____ | Start day | | | | | |
| Duration | _____ | End day | | | | | |
| Justif. | _____ | Personnel | | | | | |

Agreement _____ _____ _____ Signature_____ Present_____ Minutes_____

Name_____ ID_____ DOB _____ SCHOOL_____ AUDITOR_____

ARD/IEP DATE _____ AREA_____ HANDICAPPING CONDITION:_____

| | | Up date | | | | | |
|---|---|---|---|---|---|---|---|
| Han. Cond. | _____ | Deficit | | | | | |
| Phy. Abil. | _____ | Level | | | | | |
| Behaviors | _____ | Goal | | | | | |
| Voc. Skills | _____ | Objectives | | | | | |
| Inst.Rel.Hr. | _____ | Beh. Obj. | | | | | |
| Correct | _____ | Start day | | | | | |
| Duration | _____ | End day | | | | | |
| Justif. | _____ | Personnel | | | | | |

Agreement _____ _____ _____ Signature_____ Present_____ Minutes_____

Name_____ ID_____ DOB _____ SCHOOL_____ AUDITOR_____

ARD/IEP DATE _____ AREA_____ HANDICAPPING CONDITION:_____

| | | Up date | | | | | |
|---|---|---|---|---|---|---|---|
| Han. Cond. | _____ | Deficit | | | | | |
| Phy. Abil. | _____ | Level | | | | | |
| Behaviors | _____ | Goal | | | | | |
| Voc. Skills | _____ | Objectives | | | | | |
| Inst.Rel.Hr. | _____ | Beh. Obj. | | | | | |
| Correct | _____ | Start day | | | | | |
| Duration | _____ | End day | | | | | |
| Justif. | _____ | Personnel | | | | | |

Agreement _____ _____ _____ Signature_____ Present_____ Minutes_____

PREPARE ORIGINAL — HOUSTON INDEPENDENT SCHOOL DISTRICT — 08/0978

3 COPIES — SPECIAL EDUCATION DEPARTMENT — Page 1 of 5

ORIGINATOR: ARD/IEP COMMITTEE

## ARD/IEP COMMITTEE REPORT

PURPOSE: To document decisions regarding the child's eligibility and need for Special Education and related services.

NAME_____ ID # _____ SEX: ____M ____F D.O.B._____ GRADE _____ ETHNIC GROUP _____ SCHOOL _____

DATE OF MEETING _____ DATE OF MAILING _____ of "Notice to Parents of Specific Action Proposed or Refused", "Notice to Parents of Their Procedural Safeguards", and "Questions and Answers About Impartial Due Process Hearings" BY WHOM? _____

REVIEW OF INDIVIDUAL EVALUATION:

Review of individual assessment data indicate the presence of a physical, mental or emotional disability. ( ) YES ( ) NO

If one or more handicapping conditions are indicated, check the one(s) the committee found applicable.

| | | | |
|---|---|---|---|
| ( ) Deaf | ( ) Deaf/Blind | ( ) Mentally Retarded | ( ) Speech Handicapped |
| ( ) Hard of Hearing | ( ) Emotionally Disturbed | ( ) Language/Learning Disabled | ( ) Pregnant |
| ( ) Visually Handicapped | ( ) Orthopedically Handicapped | ( ) Other Health Impaired | |

Review of individual assessment data indicate ( ) the presence, ( ) the absence of a significant educational deficit.

A report of the child's specific learning competencies and recommendations for specific instructional and/or learning strategies and related services has been provided and reviewed by the ARD/IEP committee. ( ) YES ( ) NO

INDIVIDUALIZED EDUCATIONAL PROGRAM:

Current Educational Functioning

List grade level or functional level for each deficit area identified. Name deficit area, then list level.

_____

_____

_____

Describe physical abilities/disabilities exhibited which would affect participation in an instructional setting or in P.E.

_____

_____

Describe behaviors demonstrated which would affect educational programming.

_____

_____

_____

List skills demonstrated which may be prerequisite to participation in vocational education.

_____

_____

_____

# ARD/IEP COMMITTEE REPORT

NAME________________________ D.O.B.______________ DATE__________

| ANNUAL PROGRAM GOAL | SHORT-TERM INSTRUCTIONAL OBJECTIVE (INCLUDE EVALUATIVE CRITERIA) | START DATE | END DATE | PERSON (S) IMPLEMENTING ACTIVITY | REVIEW DATE AND RESULTS |
|---|---|---|---|---|---|
| | | | | | |

1

NAME_____ D.O.B._____ DATE_____

PLACEMENT DECISIONS: Check all areas that apply to the child's placement.

Level of Instruction: ( ) Pre-elementary ( ) Elementary ( ) Jr. High ( ) Sr. High

Describe specialized building modifications, personnel and instructional/adaptive equipment needed to implement the child's program. Follow-up is the responsibility of the Area Associate Director for Special Education.

_____

_____

Campus/Location:_____ Special Program: ( ) RDSPD ( ) ECH ( ) A&T CENTER ( ) VEH

INSTRUCTIONAL SERVICES: (Hours/week cannot exceed thirty (30) hours)

| | | |
|---|---|---|
| ( ) Regular | Subjects:_____ | HRS/WK_____ |
| ( ) Itinerant | Subjects:_____ | HRS/WK_____ |
| ( ) Resource | Subjects:_____ | HRS/WK_____ |
| ( ) Self-contained | Subjects:_____ | HRS/WK_____ |
| ( ) Hospital Class | Subjects:_____ | HRS/WK_____ |
| ( ) Homebound | Subjects:_____ | HRS/WK_____ |
| ( ) Vocational Adjustment Coordination | Give time per week on job | HRS/WK_____ |
| ( ) Vocational Education for Handicapped | | |
| Special Education Subjects: | _____ | HRS/WK_____ |
| Vocational Career Field: | _____ | HRS/WK_____ |
| Cooperative Work Training: | _____ TIME ON JOB | HRS/WK_____ |

RELATED SERVICES

| | | | | |
|---|---|---|---|---|
| ( ) Transportation | ( ) Adaptive Physical Education | HRS/WK_____ | ( ) Occupational Therapy | HRS/WK_____ |
| | ( ) Counseling | HRS/WK_____ | ( ) Physical Therapy | HRS/WK_____ |
| | ( ) Speech Therapy | HRS/WK_____ | ( ) Other: Specify | |
| | | | _____ | HRS/WK_____ |
| | | | _____ | HRS/WK_____ |

Anticipated duration of instructional services and related services. List each service and give anticipated time line. May not exceed one calendar year for this Individualized Educational Program:

_____

_____

In brief narrative form, give justification for each service provided. _____

_____

_____

_____

## ARD/IEP COMMITTEE REPORT

NAME _____ D.O.B. _____ DATE _____



It is the opinion of the majority of the voting members of the committee that this child will not be placed in Special Education:

- If the only deficiencies identified are directly attributable to a different cultural life style, or to not having had educational opportunities, or to not having achieved from previous educational experiences,

- on the basis of criteria which were developed solely on the command of the English language (for national origin minority or linguistically different students only).

( ) Agreement ( ) Disagreement—If disagreement, dissenting opinions by staff or parents must be attached.

PARENT AGREEMENT: The parent ( ) agrees ( ) disagrees with the evaluation.
( ) agrees ( ) disagrees with the program (IEP).
( ) agrees ( ) disagrees with the placement.
( ) The parent was not present at the meeting.

| SIGNATURES OF VOTING MEMBERS | TITLE | DATE |
|---|---|---|
| | (Parent (s) or Legal Guardian (s)) | |
| | Representative-Administration | |
| | Representative-Instruction | |
| | Representative-Appraisal | |
| | Educational Liaison | |
| | Student, where appropriate | |
| | | |

# ARD/IEP COMMITTEE REPORT
## RECORD OF MINUTES

NAME_____
D.O.B._____
DATE_____

On the first page of the minutes, give meeting time and location. List all persons who participated in the meeting by name and title. Record the deliberations of the meeting.



9-40

# APPENDIX B

SCHEDULE FOR PARENTS WHO WERE PRESENT AND SIGNED THE IEP.

Hello, my name is _____ and I am calling for the Houston Independent School District. May I speak with _____?

Your child _____ is in a special program for _____. Every child receiving special services has an individual educational plan that tells what is going to be learned during the school year. We are interviewing parents who have children in these special programs regarding their child's individual educational plan. We would appreciate it if you would answer a few questions for us about _____'s educational plan. You went to a meeting in _____ when your child's plan was written.

1. During this meeting did the school personnal explain to you how the educational plan was going to be developed?
   _____ YES (1)
   _____ NO (2)
   _____ DO NOT REMEMBER (3)

2. Was the reason for writing the educational plan for your child made clear to you at the meeting?
   _____ YES (1)
   _____ NO (2)
   _____ DO NOT REMEMBER (3)

3. Was the information about how your child was doing in school explained clearly to you?
   _____ YES (1)
   _____ NO (2)
   _____ DO NOT REMEMBER (3)

4. Were the minutes of the meeting read to you before you signed the plan?
   _____ YES (1)
   _____ NO (2)
   _____ DO NOT REMEMBER (3)

5. Do you feel that you had a chance to provide information about your child?
   _____ YES (1)
   _____ NO (2)
   _____ DO NOT REMEMBER (3)

   IF YES: Was this information used in writing your child's educational plan?
   _____ YES (1)
   _____ NO (2)
   _____ I DO NOT KNOW (4)

6. In which of the following area or areas is your child receiving special help?
   _____ ALL ACADEMIC SUBJECTS (19)
   _____ READING (22)
   _____ MATH (23)
   _____ SPELLING (26)
   _____ SPEECH (20)
   _____ ENGLISH (33)
   _____ HISTORY (32)
   _____ SCIENCE (27)

   _____ OTHER (please specify below)
   _____ ( )
   _____ ( )
   _____ ( )

7. Do you think this was a good plan for what your child should learn in school?
   _____ YES
   _____ NO

SX12.18.14-3



B-1

SCHEDULE FOR PARENTS WHO WERE NOT PRESENT AND DID NOT SIGN THE IEP.

Hello, my name is _____ and I am calling for the Houston Independent School District. May I speak with _____?

Your child _____ is in a special program for _____. Every child receiving special services has an individual educational plan that tells what is going to be learned during the school year. We are interviewing parents who have children in these special programs regarding their child's individual educational plan. We would appreciate it if you would answer a few questions about _____'s educational plan. Our records show you were not able to go to a meeting in _____ when your child's plan was written.

1. Have you received a copy of your child's educational plan?

   _____ YES (1) _____ NO (2)

   IF YES: When you received the plan did you know what it was?

   _____ YES (1) _____ NO (2)

   Write down parent's response:

   IF YES: Did you think this was a good plan for what your child should learn in school?

   _____ YES (1) _____ NO (2)

IF NO: STOP.

Thank you, that is the information that I need.

SK12.18.14-1



B-2

# APPENDIX C

## Variables

In order to audit the IEPs, each specific component was defined and coded by the three evaluators to indicate the presence or absence of appropriate data on the IEP. The definition used for each variable was that stated in the Special Education Guidelines (Black book) or on the IEP form. When data was omitted on the IEP, it was coded as not present. A definition of each variable and the data required for the variable to be coded as present follows:

- Handicapping condition agreement - The handicapping condition on the IEP agreed with that on the student's data file
- Physical abilities - A specific physical ability or disability exhibited which would affect participation in an instructional setting or in P.E. indicated or "none" indicated on the IEP
- Behavior - A behavior demonstrated which would affect educational programming was indicated or "none" indicated on the IEP
- Vocational skills - Skills demonstrated which may be prerequisite to participation in vocational education or "none" was indicated on the IEP
- Service hours - The number of hours for instruction and related services total 30 hours (or 15 if Early Childhood)
- Instructional/related services - The instructional and related services indicated on the IEP match those deficit areas written in the IEP (For example, if physical therapy was indicated as a related service, there was a goal, objective, etc.)
- Duration - Anticipated duration of each instructional and related service
- Justification - A narrative justification for each service listed on the IEP (A justification such as "he qualifies for the LLD label" was not considered an appropriate justification.)
- Parent agreement - Parent agreement with evaluation, program, and placement indicated on the IEP
- Parent present - Presence of parent at the ARD/IEP meeting indicated on IEP
- Signature - Signature of parent evident on signature page of IEP
- Minutes - Evidence of minutes of the meeting

For each educational deficit area indicated on the IEP Current Educational Functioning section, the level, goal, objectives, behavioral objectives, start date, end date, person responsible, and review date results (update) are linked. That is, if an educational deficit area was listed on the IEP (for example reading) but level, goal, objectives, etc. were not included for this deficit area, then the variables (level, goal, objective, etc.) were coded as not present. However, if an educational deficit area was not listed but there were goals, objectives, etc. written, then the deficit was coded as not present and the goals, objectives, etc. were coded as present. A description of the variables that comprised the section of the IEP that was prescribed for the individual child follows:

- Deficit - Any subject or functional area indicated in the IEP under Current Educational Functioning; each deficit area was coded, i.e., reading, math, motor development, etc.

- Level - The grade level or functional level for each deficit area indicated in the Current Educational Functioning section

- Annual program goal - A general achievement statement for one year that addresses one deficit area

- Objectives - A specific statement of what is to be taught in the goal/deficit area (at least one objective was needed per goal to be coded as present)

- Behavioral objective - An objective that includes learner condition, task, and criteria for achievement (All objectives within the goal/deficit area had to be stated behaviorally in order to be coded as present.)

- Start date - A date for the instruction of the objective to begin (If more than one objective was listed, each objective was dated in order to be coded as present.)

- End date - A date for the anticipated learner completion of each objective

- Person responsible - The title or name of the person responsible for implementing the objective(s)

- Update - The date each objective was reviewed and the results of the review were stated; the variable was coded as follows:

    0 - IEP not found
    1 - update correctly completed
    2 - update missing either date, results, or both
    3 - no update needed; objective still within 60 days of last update, ARD date, or start date of objective
    4 - no objectives written for deficit area

Other variables provided additional information about the IEP. These variables were defined as follows:

- Location - An indication of where the IEP was located for the audit (For IEPs audited as part of the update sample (n = 659), the IEP was found in the Area office; not found in Area office but found on campus; or was not found at either location. For IEPs not audited for update, the IEP was either found or not found in the Area office.)

- Area - A designation for the six administrative areas (Areas I - VI), the community agencies (Area VII), or the Grady School (Area VIII)

- IEP accuracy - A score that reflects how accurately the prescriptive portion of the IEP was written; the score was a summation of variables coded (goal, objective, behavioral objective, start date, end date, personnel, and update) across all deficit areas

- Parent opinions - Parents' opinions regarding the IEP process as expressed in the telephone interviews